

<i>SERFF Tracking Number:</i>	<i>MUTA-126335223</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Mutual of Omaha Insurance Company</i>	<i>State Tracking Number:</i>	<i>43721</i>
<i>Company Tracking Number:</i>	<i>LORI CWACH</i>		
<i>TOI:</i>	<i>MS021 Individual Medicare Supplement - Pre-Standardized</i>	<i>Sub-TOI:</i>	<i>MS021.000 Medicare Supplement - Pre-Standardized</i>
<i>Product Name:</i>	<i>2010 MoO PreStandardized Medicare Supplement</i>		
<i>Project Name/Number:</i>	<i>2010 Annual Rate Filing/MoO AR 2010</i>		

Filing at a Glance

Company: Mutual of Omaha Insurance Company

Product Name: 2010 MoO PreStandardized Medicare Supplement SERFF Tr Num: MUTA-126335223 State: Arkansas

TOI: MS021 Individual Medicare Supplement - Pre-Standardized SERFF Status: Closed-Approved-Closed State Tr Num: 43721

Sub-TOI: MS021.000 Medicare Supplement - Pre-Standardized Co Tr Num: LORI CWACH State Status: Approved-Closed

Filing Type: Rate

Author: Lori Cwach

Date Submitted: 10/07/2009

Reviewer(s): Stephanie Fowler

Disposition Date: 11/17/2009

Disposition Status: Approved-Closed

Implementation Date Requested: 03/01/2010

Implementation Date: 03/01/2010

State Filing Description:

General Information

Project Name: 2010 Annual Rate Filing

Project Number: MoO AR 2010

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact: 6.5%

Filing Status Changed: 11/17/2009

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 11/17/2009

Created By: Lori Cwach

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Lori Cwach

Filing Description:

2010 PreStandardized Medicare Supplement Annual Loss Ratio and Rate Adjustment Filing

This filing demonstrates loss ratio compliance and requests approval for the proposed rates. Exhibit 5 displays the overall rating action. The proposed implementation date is March 1, 2010.

SERFF Tracking Number: MUTA-126335223 State: Arkansas
Filing Company: Mutual of Omaha Insurance Company State Tracking Number: 43721
Company Tracking Number: LORI CWACH
TOI: MS021 Individual Medicare Supplement - Pre- Sub-TOI: MS021.000 Medicare Supplement - Pre-Standardized
Product Name: 2010 MoO PreStandardized Medicare Supplement
Project Name/Number: 2010 Annual Rate Filing/MoO AR 2010

Company and Contact

Filing Contact Information

Lori Cwach, Lead Actuarial Analyst Lori.Cwach@mutualofomaha.com
Rating Department 402-351-4249 [Phone]
Mutual of Omaha
Mutual of Omaha Plaza
Omaha, NE 68175

Filing Company Information

Mutual of Omaha Insurance Company CoCode: 71412 State of Domicile: Nebraska
Mutual of Omaha Plaza Group Code: 261 Company Type: Health Insurance
Omaha, NE 68175 Group Name: State ID Number:
(402) 351-2304 ext. [Phone] FEIN Number: 47-0246511

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Mutual of Omaha Insurance Company	\$50.00	10/07/2009	31113674

SERFF Tracking Number:	MUTA-126335223	State:	Arkansas
Filing Company:	Mutual of Omaha Insurance Company	State Tracking Number:	43721
Company Tracking Number:	LORI CWACH		
TOI:	MS021 Individual Medicare Supplement - Pre-Standardized	Sub-TOI:	MS021.000 Medicare Supplement - Pre-Standardized
Product Name:	2010 MoO PreStandardized Medicare Supplement		
Project Name/Number:	2010 Annual Rate Filing/MoO AR 2010		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	11/17/2009	11/17/2009

SERFF Tracking Number:	MUTA-126335223	State:	Arkansas
Filing Company:	Mutual of Omaha Insurance Company	State Tracking Number:	43721
Company Tracking Number:	LORI CWACH		
TOI:	MS021 Individual Medicare Supplement - Pre-Standardized	Sub-TOI:	MS021.000 Medicare Supplement - Pre-Standardized
Product Name:	2010 MoO PreStandardized Medicare Supplement		
Project Name/Number:	2010 Annual Rate Filing/MoO AR 2010		

Disposition

Disposition Date: 11/17/2009

Implementation Date: 03/01/2010

Status: Approved-Closed

Comment: The requested rate increase has been approved to be implemented on or after March 1, 2010. This approval is subject to the following:

- Increases will not be given more frequently than once in a twelve-month period

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Mutual of Omaha Insurance Company	6.500%	6.500%	\$3,015	15	\$46,384	6.500%	6.500%

<i>SERFF Tracking Number:</i>	<i>MUTA-126335223</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Mutual of Omaha Insurance Company</i>	<i>State Tracking Number:</i>	<i>43721</i>
<i>Company Tracking Number:</i>	<i>LORI CWACH</i>		
<i>TOI:</i>	<i>MS02I Individual Medicare Supplement - Pre-Standardized</i>	<i>Sub-TOI:</i>	<i>MS02I.000 Medicare Supplement - Pre-Standardized</i>
<i>Product Name:</i>	<i>2010 MoO PreStandardized Medicare Supplement</i>		
<i>Project Name/Number:</i>	<i>2010 Annual Rate Filing/MoO AR 2010</i>		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Accepted for Informational Purposes	No
Rate	Rates 2010	Approved	Yes

SERFF Tracking Number:	MUTA-126335223	State:	Arkansas
Filing Company:	Mutual of Omaha Insurance Company	State Tracking Number:	43721
Company Tracking Number:	LORI CWACH		
TOI:	MS021 Individual Medicare Supplement - Pre-Standardized	Sub-TOI:	MS021.000 Medicare Supplement - Pre-Standardized
Product Name:	2010 MoO PreStandardized Medicare Supplement		
Project Name/Number:	2010 Annual Rate Filing/MoO AR 2010		

Rate Information

Rate data applies to filing.

Filing Method:	SERFF
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	6.500%
Effective Date of Last Rate Revision:	03/01/2009
Filing Method of Last Filing:	SERFF

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Mutual of Omaha Insurance Company	6.500%	6.500%	\$3,015	15	\$46,384	6.500%	6.500%

SERFF Tracking Number: MUTA-126335223 State: Arkansas

Filing Company: Mutual of Omaha Insurance Company State Tracking Number: 43721

Company Tracking Number: LORI CWACH

TOI: MS021 Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre- Standardized

Product Name: 2010 MoO PreStandardized Medicare Supplement

Project Name/Number: 2010 Annual Rate Filing/MoO AR 2010

Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved 11/17/2009	Rates 2010	H66, M101, M115, M133, M156, M3, M4, M6, MD42, 32CMO, 59CMO, 3562M, 3563M, 3564M, 3565M, 24310, 24311	Revised	Previous State Filing Number: Percent Rate Change Request:	MUTA- AR RATE 1258249 SUMMARY.pdf 06 AR RATES 6.500 2010.pdf

**MUTUAL OF OMAHA INSURANCE COMPANY
PRE-STANDARDIZED MEDICARE SUPPLEMENT
ARKANSAS**

<u>FORM</u>	<u>DATE APPROVED</u>	<u>REVISED RATE SCHEDULE</u>		
H66	08/30/1982	H66	AR BASE RATE	09/21/2009 0008
M101	09/19/1985	M101	AR BASE RATE	09/21/2009 0008
M115	12/05/1988	M115	AR BASE RATE	09/21/2009 0008
M133	12/05/1988	M133	AR BASE RATE	09/21/2009 0008
M156	05/07/1990	M156	AR BASE RATE	09/21/2009 0008
M3	06/08/1982	M3	AR BASE RATE	09/21/2009 0008
M4	02/13/1985	M4	AR BASE RATE	09/21/2009 0008
M6	06/08/1982	M6	AR BASE RATE	09/21/2009 0008
32CMO	05/21/1981	32CMO	AR BASE RATE	09/21/2009 0008
3562M (50VB)	09/25/1975	3562M (50VB)	AR BASE RATE	09/21/2009 0008
3563M (50VB)	09/25/1975	3563M (50VB)	AR BASE RATE	09/21/2009 0008
3564M (51VB)	09/25/1975	3564M (51VB)	AR BASE RATE	09/21/2009 0008
3565M (51VB)	09/25/1975	3565M (51VB)	AR BASE RATE	09/21/2009 0008
59CMO	05/21/1981	59CMO	AR BASE RATE	09/21/2009 0008
ATMSB	03/13/1986	ATMSB	AR BASE RATE	09/21/2009 0009
ATMSE	03/13/1986	ATMSE	AR BASE RATE	09/21/2009 0009
MD42	11/10/1986	MD42	AR BASE RATE	09/21/2009 0008

Schedule of Monthly Rates
For Policy Form H66 - Arkansas

Attained
Age

65&Over 715.82

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Policy Form M101 - Arkansas

Attained
Age

65&Over 262.57

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Policy Form M115 - Arkansas

Attained
Age

65&Over 259.68

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Policy Form M133 - Arkansas

Attained
Age

65&Over 259.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Policy Form M156 - Arkansas

Attained
Age

65&Over 254.94

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Policy Form M3 - Arkansas

Attained
Age

65&Over 746.84

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Policy Form M4 - Arkansas

Attained
Age

65&Over 516.68

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Policy Form M6 - Arkansas

Attained
Age

65&Over 353.48

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Policy Form MD42 - Arkansas

Attained Age	
All	283.09

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Policy Form 32CMO - Arkansas

Attained Age	
All	882.30

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Rider Form 3562M - Arkansas
When Attached to Policy Form 50VB

Attained Age	
All	226.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Rider Form 3563M - Arkansas
When Attached to Policy Form 50VB

Attained Age	
All	245.62

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Rider Form 3564M - Arkansas
When Attached to Policy Form 51VB

Attained Age	
All	226.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Rider Form 3565M - Arkansas
When Attached to Policy Form 51VB

Attained Age	
All	245.62

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Policy Form 59CMO - Arkansas

Attained Age	
All	481.19

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates
For Policy Form ATMSB - Arkansas

Issue Age

65-69	142.95
70-74	142.95
75-79	142.95
80-84	142.95

Schedule of Monthly Rates
For Policy Form ATMSE - Arkansas

Issue Age

65-69	539.92
70-74	539.92
75-79	539.92
80-84	539.92